NOTIFICATION OF DEMOLITION AND RENOVATION

Operator Project #	Postmark		Date Received		Notification #	Jach.		
I. Type of Notification (O=Original R=Revised C=Canceled) Original								
II. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)								
OWNER NAME: Environmental Liablity Transfer								
Address: 1650 Des Peres Road, Suite 306								
City: St. Louis		State: Mis	ssouri	zip: 63131				
Contact: Adam Peetz		Tel: (314) 775-0			0500			
REMOVAL CONTRACTOR: Enterprise Network Resolutions Contracting, LLC.								
Address: 874 Piney Hollow Road, P. O. Box 70								
city: Winslow		State: Ne	State: New Jersey zip: 08095					
Contact: Ted Budzynski		Tel: (609) 567-0600						
OTHER OPERATOR: Not Applica	ble		464	777	***	45.0		
Address:								
City:		State:	State: Zip:					
Contact:		Tel:						
III. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation) Demo								
IV. IS ASBESTOS PRESENT? (Yes/No) Yes								
V. FACILITY DESCRIPTION (Include building name, number and floor or room number)								
Bldg. Name: Building # 5								
Address: 1160 State Street								
City: Perth Amboy			State: New Jersey County: Middle		sex			
Site Location: 1160 State Street, Perth Amboy, New Jersey								
Building Size: Approximately 15,	000 sq. ft.	# of Floor	# of Floors: 3 Age in Years: 50)			
Present Use: Vacant	Present Use: Vacant		Prior Use: Manufacturing					
VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL: Bulk TEM								
VII. APPROXIMATE AMOUNT OF AS INCLUDING:	F	RACM Fo Be	Nonfriable Asbestos Material Not To Be Removed		Indicate Unit of Measurement Below			
Regulated ACM to be Rem Category I ACM Not Remo Category II ACM Not Remo	noved Re	moved	Category I	Category II	UI	NIT		
Pipes					LnFt:	Ln M:		
Surface Area	transite roof	panels, tiles, mastic			sqFt: 10,500	Sq M:		
Vol RACM Off Facility Component		4			CuFt:	Cu M:		
VIII. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: 02/02/16 Complete: 04/15/16								
IX. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: 02/02/16 Complete: 04/15/16								

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED: Once the asbestos abatement and decontamination activities are completed, ENRC will commence with the demolition. The building will be demolished with trackhoes equipped with hydraulic grapplers. The trackhoes will bring down the walls and roof one at a time and consoliciate the debris for staging and loading, Building debris will be disposed as contaminated material, or ACM, which will be handled separately from the rest of the building structure. During the dismantlement of the building, dust control measures will be on immediate standby. This shall include water spraying with a 2° fire hose from a hydrarior for poly lank.							
XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION OR RENOVATION SITE: continuous spraying of water on entire building and ACM areas using a 2" fire hose from a poly tank and/or hydrant onsite.							
XII. WASTE TRANSPORTER #1							
Name: Bull Waste & Recycling, Inc.							
Address: 427 white Horse Pike, P. O. Box 528							
City: Berlin	: Berlin State: New		zip: 08009				
Contact Person: Ted Budzynski			Tel: (609) 567-0600				
WASTE TRANSPORTER #2							
Name: Russell Reid, Inc.							
Address: 200 Smith Street, P. O. Box 130							
city: Keasbey	State: Nev	w Jersey	zip: 08832				
Contact Person: Scott Withers			Tel: (732) 692-2447				
XIII. WASTE DISPOSAL SITE							
Name: Salem County Sanitary Landfill							
Address: Route 540 & McKillip Road							
_{City:} Alloway Twp.	State: Nev	w Jersey	z _{ip:} 08001				
Tel: (856) 935-7900							
XIV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW:							
Name: Not Applicable		Title:	Title:				
Authority:							
Date of Order (MM/DD/YY):		Date Ordered t	Date Ordered to Begin (MM/DD/YY):				
XV. FOR EMERGENCY RENOVATIONS: Not Applicable							
Date and Hour of Emergency (MM/DD/YY):							
Description of the sudden unexpected event:							
Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden:							
Not Applicable							
XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASTESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER:							
Continuous wetting of any/all ACM material found. Separate ACM from general construction debris, if possible, and place in ACM bags. All ACM to be placed in lined dumpsters.							
XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL BE ON- SITE DURING THE DEMOLITION OR RENOVATION, AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS.							
(Signature of Owner/Operator) (Date)							
XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORR	ECT:		1/19/14 (Date)				